Application No. (if known): 10/552,291

Attorney Docket No.: 87075(307161)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 311700545 US in an envelope addressed to:

MS Petition Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on	September 17, 2010				
	Date				

alyon I. duces					
Signature					
Alyson J. Lucas					
Typed or printed name of person signing Certificate					
	(617) 951-0735				
Registration Number, if applicable	Telephone Number				

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page) Fee Transmittal (1 page) Unintentionally (2 pages)

Petition to Revive Unintentionally Abandoned Application (2 pages)

Charge to Deposit Account 04-1105 of \$810.00

PTO/SB/17 (10-08)

Approved for use through 09/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL FOR FY 2009 X Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (5) 810.00 Attorney Docket No. 97075(307161) METHOD OF PAYMENT (check all that apply)	Effective on 12/08/2004.			Complete if Known				
FOR FY 2009 First Named Inventor Sur-Ock Nam Examiner Name Not Yet Assigned	Επετίνε on 12/08/2004.			Application Nun				
FOR FY 2009 First Named Inventor Ju-Ock Nam Examiner Name Not Yet Assigned Not	FEE TRANSMITTAL			Filing Date	(October 3, 2005		
Applicant claims small entity status. See 37 CFR 1.27 At Unit NIA	1							
METHOD OF PAYMENT (check all that apply) Check	FOLL T ZOOR			Examiner Name	1	Not Yet Assigned		
Check	x Applicant	claims small entity sta	tus. See 37 CFR 1.2	27	Art Unit			
Check Credit Card Money Order Other (please identify): X Deposit Account Deposit Account Name: Edwards Angell Palmer & Dodge LLP	TOTAL AMOUNT	OF PAYMENT	(\$) 810.00)	Attorney Docket	No. {	37075(307161)	
X Deposit Account Deposit Account Name: Edwards Angell Palmer & Dodge LLP	METHOD OF	PAYMENT (check	all that apply)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below	Check	Credit Card	Money Order	No	ne Other (please identify	y):	
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION	X Deposit Acc	count Deposit Account	Number: 04	-1105	Deposit	Account Name	Edwards Angell	Palmer & Dodge LLP
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION	For the a	above-identified dep	osit account, the l	Director is	hereby authorize	ed to: (chec	k all that apply)	
Teels Junder 37 CFR 1.16 and 1.17 TeEC CALCULATION	X Ch	arge fee(s) indicate	d below		Charg	e fee(s) ind	licated below, exc	ept for the filing fee
SEARCH FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (\$) Fee (\$)	fee	e(s) under 37 CFR 1		yments o	f x Credit	any overpa	ayments	
Paper Pape								
Sample S	1. BASIC FILING				4 DOL / 5550	EV4.44	1ATION 5550	
Page		F		SE		EXAMIN		
Design 220 110 100 50 140 70	Application Ty	pe Fee (<u>Fee (\$</u>		Fee (\$)		Fees Paid (\$)
Plant	Utility	330	165	540	270	220	110	·
Reissue 330 165 540 270 650 325	Design	220	110	100	50	140	70 _	
Provisional 220 110 0 0 0 0 0 0	Plant	220	110	330	165	170	85 _	
2. EXCESS CLAIM FEES Fee Obscription Each claim over 20 (including Reissues) Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claim over 3 (including Reissues) Multiple dependent claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Fee (\$) Fee Paid (\$) Fee Paid (\$)	Reissue	330	165	540	270	650	325	
Fee (\$) Fee (\$) Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims -20 or HP	Provisional	220	110	0	0	0	0	
Each claim over 20 (including Reissues) Each lidependent claims over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Submitted BY Registration No. (Altomey/Agent) Gas 67 Telephone (617) 239-0839	2. EXCESS CLA	IM FEES						
Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims -20 or HP HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 =		20 (imply 4: D - '-	aa.)					•
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)		, -	•					
Total Claims -20 or HP x = HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) -3 or HP =	_	·	idding Keissues)					
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP =			ne Foc (\$)	c.	ee Paid /¢\	RA.		·
HP = highest number of total claims paid for, if greater than 20. Indep. Claims					r aid (\$)	_		
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	HP = highest numb	er of total claims paid fo				<u> </u>		177
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	Indep. Claims	Extra Clain	s Fee (\$)	F	ee Paid (\$)			
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets			_ ~					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	HP = highest number of independent claims paid for, if greater than 3.							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 =								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned SUBMITTED BY Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent)								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x = // 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned 810.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 63,867 Telephone (617) 239-0839								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned SUBMITTED BY Registration No. (Altorney/Agent) 63,867 Telephone (617) 239-0839								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned SUBMITTED BY Signature Registration No. (Altorney/Agent) 63,867 Telephone (617) 239-0839								
Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned 810.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 63,867 Telephone (617) 239-0839								
SUBMITTED BY Signature Registration No. (Attorney/Agent) 63,867 Telephone (617) 239-0839								
Signature Registration No. (Attorney/Agent) 63,867 Telephone (617) 239-0839	Other (e.g., late filing surcharge): 2453 Petition to revive unintentionally abandoned 810.00							
(Attorney/Agent) 03,007 Telephone (017) 239-0839	SUBMITTED BY		- ^					
	Signature	V~				63,867	Telephone	(617) 239-0839
						ptember 17, 2010		

PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number 10/552,291-Conf. #6194 Filing Date **TRANSMITTAL** October 3, 2005 First Named Inventor **FORM** Ju-Ock Nam Art Unit 1654 **Examiner Name** Bradley, Christina (to be used for all correspondence after initial filing) Attorney Docket Number 87075(307161) Total Number of Pages in This Submission

				<u> </u>	
ENCLOSURES (Check all that apply)					
x Fee Transr	nittal Form	Drawing(s)		After Allowance Communication to TC	
Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After	Final	Petition to Convert to a Provisional Application		Proprietary Information	
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter	
Extension of Time Request		Terminal Disclaimer Request for Refund CD, Number of CD(s)		X Other Enclosure(s) (please Identify below): Petition to Revive Unintentionally Abandoned Application (2 pages)	
Express Abandonment Request					
Information Disclosure Statement				Return Receipt Postcard	
Certified Copy of Priority Document(s)		Landscape Table on	·		
Reply to Missing Parts/ Incomplete Application		Remarks			
Reply to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP				
Signature	e Con				
Printed name	Kongsik Kim				
September 17, 2010			Reg. No.	63,867	